Date:____/_____/_____

To,

UCC Department
Indira Securities Pvt. Ltd. 204-205
Amardarshan Building, 28/2
Old Palasia, Indore MP 452018
Ph.: 0731-4797170-71-72

Subject: Addition of Segment- **NSE CASH/ NSE F&O/NSE CD/NSE SLBM/BSE/BSE CD/MCX/NCDEX**

Dear Sir,

This is in furtherance to the KYC details submitted by me/us to you. I/we wish to trade in MCX/NCDEX/NSE FO/NSE CD. I understand that this letter shall form part of KYC Agreement executed on __/__/ _. I have received Risk Disclosure Document, Rights & Obligation, Policies & Procedure, and Other Terms & Conditions that would prevail as approved by SEBI from time to time.

Exchange	Membership No	SEBI Registration No. & Date	Brokerage Type	% age	Minimum
MCX	56470	INZ000188930 / 01.08.2018	Future		
			Option		
NCDEX	01277	INZ000188930 / 01.08.2018	Future		
			Option		
NSE FO	12866	INZ000188930/ 01.08.2018	Future		
			Option		
NSE CD	12866	INZ000188930/ 01.08.2018	Future		
			Option		
BSE CD	663	INZ000188930/ 01.08.2018	Future		
			Option		
NSE **CASH**	12866	INZ000188930/ 01.08.2018	**Delivery**		
			Intraday		
BSE **CASH**	663	INZ000188930/ 01.08.2018	**Delivery**		
			Intraday		

Please enable my below mentioned client code for these segment/s.

Please do the needful.

Yours Faithfully,

Signature:_____ Occupation: _____

Client Code: _____ Email ID: _____

Client Name: _____ Contact No.:_____

Mother's Name: _____

Aadhar Card No.:_____

Gross Annual Income Details : ☐ Below 1 Lac ☐ 1- 5 Lacs ☐ 5-10Lacs ☐10 -25 Lacs☐25 - 100 Lacs
As on date:

GST Registration No.:_____(If Available)

Know Your Client (KYC)
Application Form (For Individuals Only)

Please fill the form in ENGLISH and in BLOCK letters Fields marked * are mandatory
Fields marked + are pertaining to CKYC and mandatory only if processing CKYC also

Application Number:

Application Type*: ☐ New KYC ☐ Modification KYC

KYC Mode*:

☐ Normal ☐ EKYC OTP ☐ EKYC Biometric ☐ Online KYC ☐ Offline EKYC ☐ Digilocker

1. Identity Details (please refer guidelines overleaf)

PAN* _____ Please enclose a duly attested copy of your PAN Card

Name* (same as ID proof) _____ _____ _____ _____

Maiden Name+ (if any) _____ _____ _____ _____

Fathers/Spouse's Name* _____ _____ _____ _____

Date of Birth* |D|D| |M|M| |Y|Y|Y|Y

Photo

Gender* ☐ Male ☐ Female ☐ Transgender

Marital Status* ☐ Single ☐ Married ☐

Nationality* ☐ Indian ☐ Other _____

Residential Status* ☐ Resident Individual ☐ Non Resident Individual

Please Tick (✓) ☐ Foreign National ☐ Person of Indian Origin

3 _____

(Passport mandatory for NRIs, PIOs and Foreign Nationals)

Proof of Identity (POI) submitted for PAN exempted cases (Please tick)

☐ A - Adhaar Card XXXX XXXX __ __ __ __

☐ B - Passport No. _____

☐ C - Voter ID Card _____ Expiry Date |D|D| |M|M| |Y|Y|Y|Y

☐ D - Driving License _____ Expiry Date |D|D| |M|M| |Y|Y|Y|Y

☐ E - NREGA Job Card _____

☐ F - NPR Letter _____

☐ Z - Others _____ (any document notified by Central Government)

Identification Number _____

2. Address Details* (please refer guidelines overleaf)

A. Correspondence/ Local Address*

Line 1* _____

Line 2 _____

Line3 _____

City/ Town/Village* _____ District* _____ Pin Code* _____

State* _____ Country* _____

Address Type* ☐ Residential/Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified

Applicant Wet Sign

4 _____

Applicant e-SIGN

5 _____

INDIRA
Gateway to Prosperity

B. Permanent residence address of applicant, if different from above A / Overseas Address* (Mandatory for NRI Applicant)

Line 1* _____

Line 2 _____

Line3 _____

City/ Town/Village* _____ District* _____ Pin Code* _____

State* _____ Country* _____

Address Type* ☐ Residential/Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified

Proof of Address* (attested copy of any 1 POA for correspondence and permanent address each to be submitted)

☐ A - Adhaar Card XXXX XXXX __ __ __ __

☐ B - Passport No. _____

☐ C - Voter ID Card _____ Expiry Date D D M M Y Y Y Y

☐ D - Driving License _____ Expiry Date D D M M Y Y Y Y

☐ E - NREGA Job Card _____

☐ F - NPR Letter

☐ Z - Others _____ (any document notified by Central Government)

Identification Number _____

3. Contact Details

Email Id _____

Mobile No. _____

Tel. (Off.) _____ Tel (Resi.) _____

4. Applicant Declaration

	Applicant e-SIGN	Applicant Wet Signature
I/We hereby declare that the KYC details furnished by me are true and correct to the best of my/our knowledge and belief and I/we under-take to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am/We are aware that I/We may be held liable for it. I/We hereby consent to receiving information from CVL KRA through SMS/Email on the above registered number/Email address. I am/We are also aware that for Aadhaar OVD based KYC, my KYC request shall be validated against Aadhaar details. I/We hereby consent to sharing my/our masked Aadhaar card with readable QR code or my Aadhaar XML/Digilocker XML file, along with passcode and as applicable, with KRA and other Intermediaries with whom I have a business relationship for KYC purposes only. DATE: _____ (DD-MM-YYYY) PLACE: _____		6 _____

5. For Office Use Only

In-Person Verification (IPV) carried out by*	Intermediary Details*
IPV Date _____ Emp. Name _____ Emp. Code _____ Emp. Designation _____	☐ Self certified document copies received (OVD) ☐ True Copies of documents received (Attested) AMC / Intermediary Name : INDIRA SECURITIES PVT. LTD.
[Employee Signature]	Indira Securities Private Limited Indore (M.P.)